

JOB AID

How to Generate Non-Pharmacy Prior Approval Adverse Decision Letters

OVERVIEW

This document will guide authorized users on the processes for identifying and generating non-pharmacy Prior Approval (PA) Adverse Decision Letters. This document will also explain the use of the **Letter Policy and Denial Reason Search** and **PA Spell Check Override Search** pages.

PA Adverse Decision Letters are specific to adverse decisions for Division of Health Benefits (DHB) services and are designed to comply with federal regulations and statutes addressing the due process rights of Medicaid/Health Choice beneficiaries. The **PA Detail** and **Comments/Letters** pages are used to support the PA Adverse Decision Letters.

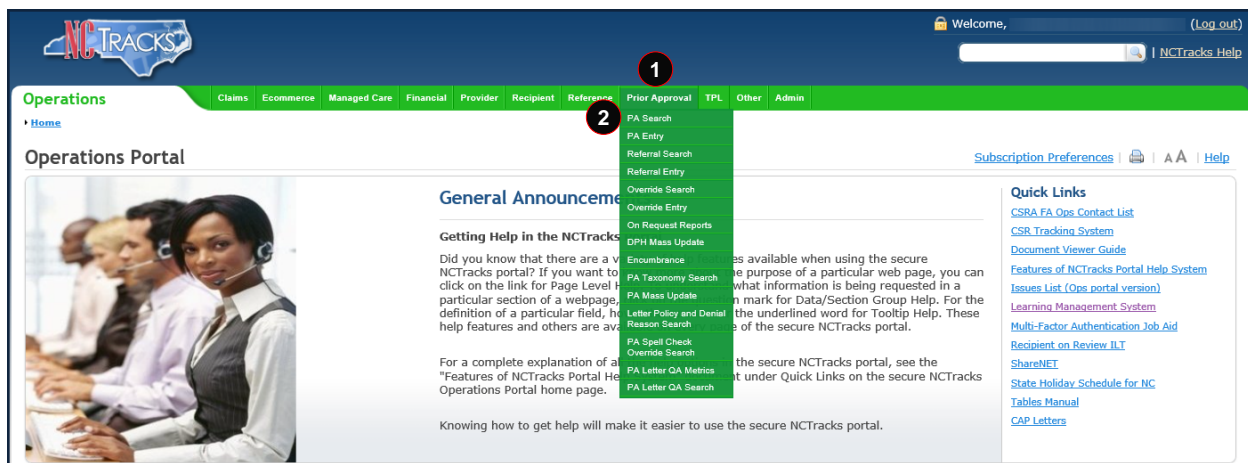
The **Letter Policy and Denial Reason Search** page allows authorized users to perform a search of PA criteria to obtain the different PA criteria sequence numbers (identifying PA policy) associated with the entered search. Additionally, this page allows authorized users to generate new PA criteria sequences.

The **PA Spell Check Override Search** page allows users to search words identified as having spelling errors but overridden by the user. Additionally, authorized users can retrieve the next available word to review for acceptance into the customized spell check dictionary.

GENERATING PA ADVERSE DECISION LETTERS

The PA Adverse Decision Letters are specific to adverse decisions such as Denied, Modified Approved, or Reduction for DHB services.

These letters are generated when the PA request made does not comply with federal regulations. A PA Adverse Decision Letter also includes information that addresses the due process rights of Medicaid/Health Choice beneficiaries.



Step	Action
1	Hover over the Prior Approval tab.
2	Select PA Search .

PA Search Page

The **PA Search** page allows authorized users to search for any PA using the **PA Review** section, or to search for a specific PA using the **Search Criteria** section.

Step	Action
1	Enter data in one or more search criteria sections (in this example, the PA Number is used as the search criterion).
2	Select the Find button.

Search Results


All PAs that meet the search criteria are displayed in the **Search Results** section.

SEARCH RESULTS

PA Number	Line	PA Type	Status	Recipient ID	Recipient Name	Requesting NPI	Billing NPI	Procedure	Effective Begin Date	Effective End Date	Alert Date	User ID
	1	A04-DME	S-SUSPENDED					K0001			01/01/0001	

Step	Action
3	Select the PA Number link.

PA Detail Page – Header Tab

The **Header** tab breaks down the PA details into multiple sections. On this page, Audit icons () may display, indicating that the authorized user has the ability to view changes made to a value as well as who made the changes and when they were made.

The **Overview** section displays information assigned to or associated with the PA based on the information submitted during the entry process.

1

Operations | Claims | Ecommerce | Managed Care | Financial | Provider | Recipient | Reference | **Prior Approval** | TPL | Other | Admin

Home | PA Search | PA Detail | PA Summary | PA Detail

PA: [REDACTED]

* Indicates a required field

Legend

Header | Detail | Edit/Routing | Comments/Letters | Attachments

OVERVIEW

PA #: [REDACTED] PA Type: A04-DME
 Confirmation #: [REDACTED] Tracking Number: [REDACTED]
 Payer: DHB Health Plan: NCXIX
 Req. Begin Date: 09/02/2022 Req. End Date: 09/30/2022
 Effective Begin Date: 01/01/0001 Effective End Date: 01/01/0001
 PASARR #: [REDACTED] Media Type: FAX
 PrePayment Review: [REDACTED] E-Signature: NO
 EPSDT Indicator: ☐ Yes ☒ No
 Non-Covered Service Indicator: ☐ Yes ☒ No
 Initial/Reauth Indicator: R-REAUTH

Documents: View
 Claim Action: [REDACTED]
 Benefit Plan: DHB ADMIN
 278 Comments: N
 Submit Date: 09/07/2022
 Received Date: 09/07/2022
 Attachment Due Date: 01/01/0001
 PA Summary: View

RECIPIENT

Submitted Recipient ID: [REDACTED] Confirm
 Eligibility Begin Date: 08/01/2021 Eligibility End Date: 04/30/2031
 Eligibility Coverage Code: MADNN-MADNN TPL Medicare Search: View
 Name: [REDACTED] Date of Birth: [REDACTED]
 Gender: F-FEMALE Living Arrangement: 10-PRIV-NO1/3
 SSN: [REDACTED] Medicare #: [REDACTED]
 Other Insurance: [REDACTED]
 Address Line 1: [REDACTED] City: WENDELL
 Address Line 2: [REDACTED] State: NC-N CAROLINA
 ZIP Code: 27591-0000 View History

REQUESTING PROVIDER

NPI: [REDACTED] or Atypical Provider ID: [REDACTED]
 Address/Locator: [REDACTED] Find
 Taxonomy: 19340000X-Single Specialty
 Name: MCDOWELL HOSPITAL INC Contact Name: [REDACTED]

Operations | Claims | Ecommerce | Managed Care | Financial | Provider | Recipient | Reference | **Prior Approval** | Health Check | TPL | Other | Admin

Home | PA Search | PA Detail

PA: [REDACTED] - [REDACTED] ([REDACTED])

* Indicates a required field

Legend

Header | Detail | Edit/Routing | Comments/Letters | Attachments

OVERVIEW

PA #: [REDACTED] PA Type: P21-APPLIANCES
 Confirmation #: [REDACTED] Tracking Number: [REDACTED]
 Payer: DHB Health Plan: NCXIX
 Req. Begin Date: [REDACTED] Req. End Date: [REDACTED]
 Effective Begin Date: [REDACTED] Effective End Date: [REDACTED]
 PASARR #: [REDACTED] Media Type: WEB
 PrePayment Review: [REDACTED]
 EPSDT Indicator: ☐ Yes ☒ No
 Non-Covered Service Indicator: ☐ Yes ☒ No
 Initial/Reauth Indicator: [REDACTED]

Documents: View
 Claim Action: [REDACTED]
 Benefit Plan: EHDJ
 278 Comments: N
 Submit Date: [REDACTED]
 Received Date: [REDACTED]
 Attachment Due Date: [REDACTED]

RECIPIENT

Submitted Recipient ID: [REDACTED] Confirm
 Eligibility Begin Date: [REDACTED] Eligibility End Date: [REDACTED]
 Eligibility Coverage Code: MAFCN-MAFCN TPL Medicare Search: View
 Name: [REDACTED] Date of Birth: [REDACTED]
 Gender: [REDACTED] Living Arrangement: [REDACTED]
 SSN: [REDACTED] Medicare #: [REDACTED]
 Other Insurance: [REDACTED]
 Address Line 1: [REDACTED] City: [REDACTED]
 Address Line 2: [REDACTED] State: [REDACTED]
 ZIP Code: [REDACTED]

REQUESTING PROVIDER

NPI: [REDACTED] or Atypical Provider ID: [REDACTED]
 Address/Locator: [REDACTED] Find
 Taxonomy: [REDACTED]

PA Detail Page – Detail Tab

Select the **Detail** tab to display the PA details. The information is displayed in the **PA Detail**, **Diagnosis Codes**, and **PA Edits** sections of the page.

Step	Action
1	Select the Detail tab.

Each record in the **PA Detail** section is called a detail line and contains the specifics of a requested service.

During a PA search, each detail line displays a summary of the requested services. The **Effective Begin Date**, **Effective End Date**, **Approved Units**, and **Approved Unit Type** fields are populated when the PA has a final status.

PA DETAIL

Effective Begin Date	Effective End Date	Proc. Code	Req Units	Req Unit Type	Approved Units	Approved Unit Type	Status	Date	User ID
mm/dd/yyyy	mm/dd/yyyy	W4005	1.000		0.000		S-SUSPENDED	09/07/2022	ATROY671

Service Site:

Req. Begin Date: 09/02/2022

Req. Amount: \$0.00

Req. Frequency: 0

Req Frequency Period:

Req Duration: 0

Req Duration Period:

Used Units: 0.000

Modifier:

Last Claim Update:

Encumbered Amount: 0.00

Reauth PA Number:

PA Summary: [View](#)

Is Proc. Code A Generic Code?
☒ Yes ☐ No

Generic Code Description: 99

Generic Code Text:

Service Type:

Req. End Date: 09/30/2022

Approved Amount: \$ 0.00

Approved Frequency: 0

Approved Period:

Approved Duration: 0

Approved Duration Period:

Approved Rate: \$ 0.00

Used Amount: 0.00

TCN:

DME Service Type:

History #:

HOS Reason: 01-NONE

Medicare Coverage: No

Rendering Provider

☐ Same as Billing Provider

Rendering NPI: OR Atypical Provider ID:

Address/Locator:

Taxonomy: 193400000X-Single Specialty

Rendering Provider: MCDOWELL HOSPITAL INC

Address 1: 430 RANKIN DR

Address 2:

Phone: (828) 659-5196

Contact Name:

City: MARION

State: NC-N CAROLINA

ZIP Code: 28752-6568

Current Status

Status: S-SUSPENDED ☐ Approved as Requested

Reason:

Determining Clinician:

Date: 09/07/2022

User ID:

STATUS HISTORY

Status	Reason	Date	User ID
SUSPENDED		09/07/2022	<input type="text"/>

Appeal Status

Status:

Date:

Header

Detail

Edit/Routing

Comments/Letters

PA DETAIL

Line	Effective Begin Date	Effective End Date	FDB Drug Code	Drug Code Type	Status	Status Date	User ID
1	08/25/2022	08/25/2022	76204020025	N-DRUG CODE	A-APPROVED	08/25/2022	SYSTEM

Drug Type:

Req. Begin Date: 01/01/0001

Used Units: 75.000

Used Amount: 0.00

TCN :

Reauth PA Number:

PA Summary: View

* Requested Drug Different From Assigned Drug?:
☐ Yes ☒ No

Requested

* Units/30 days: 0.000 * Length of Therapy: Total Units: 0.000
 Amount: \$ 0.00

Approved

Units/30 days: 0 Length of Therapy: Total Units: 75.000
 Amount: \$ 41.60 Rate: \$ 0.00

Current Status

Status: A-APPROVED ☐ Approved as Requested Date : 08/25/2022
 Reason : 290-290 User ID: SYSTEM
 Determining Clinician:

History #:

Req. End Date: 01/01/0001

Remaining Units: 0.000

Max Reimb/Claim:

Last Claim Update: 08/25/2022

MOS Reason:

STATUS HISTORY

Status	Reason	Status Date	User ID
APPROVED	290-290	08/25/2022	SYSTEM

Appeal Status

Status: Date:

Step	Action
1	Select the detail line to expand it.
2	Answer the question, " Is Proc Code a Generic Code Request? ". If Yes is selected, the user must then select the Generic Code Generic Code Description which begins with the same digit of the procedure code.

* Is Proc Code A Generic Code?:
☒ Yes ☐ No

3 Generic Code Description: 99

4 Generic Code Text:

250 characters remaining

* Is Proc Code A Generic Code?:
☒ Yes ☐ No

Generic Code Description: 99

Generic Code Text:

250 characters remaining

Step	Action
3	Select the appropriate code from the Generic Code Generic Code Description drop-down menu. Note: If there are no corresponding codes, the system will default to the 99-Other option and require the user to manually enter text in the Generic Code Generic Code Text field.
4	Enter Generic Code Generic Code Text information.

Is Proc Code A Generic Code?:
☒ Yes ☐ No

Generic Code Description: 99
 Generic Code Text:
 250 characters remaining

Rendering Provider
☐ Same as Billing Provider

Rendering NPI:
 Address/Locator:
 Taxonomy:
 OR Atypical Provider ID:
 Find

Rendering Provider:
 Address 1:
 Address 2:
 Phone:
 Contact Name:
 City:
 State:
 ZIP Code:
 Date: 12/06/2019
 User ID: FMSJM90

Current Status: **5**
 Status:
 Reason:
 Determining Clinician:
 Approved as Requested ☐

STATUS HISTORY

Status	Reason	Date	User ID
SUSPENDED		12/06/2019	

Appeal Status:
 Status:
 Date:
 Update Cancel

Is Proc Code A Generic Code?:
☒ Yes ☐ No

Generic Code Description: 99
 Generic Code Text:
 250 characters remaining

Rendering Provider
☐ Same as Billing Provider

Rendering NPI:
 Address/Locator:
 Taxonomy:
 OR Atypical Provider ID:
 Find

Rendering Provider:
 Address 1:
 Address 2:
 Phone:
 Contact Name:
 City:
 State:
 ZIP Code:
 Date: 12/06/2019
 User ID: FMSJM90

Current Status:
 Status:
 Reason:
 Determining Clinician:
 Approved as Requested ☐

STATUS HISTORY

Status	Reason	Date	User ID
SUSPENDED		12/06/2019	

Appeal Status:
 Status:
 Date:
 Update Cancel

Step	Action
5	Select the appropriate Status from the Status drop-down menu.

Note: A status of D-DENIED, M-MODAPPROV, or R-REDUCTION generates a PA Adverse Decision Letter.

State Pend is a pend status only applicable to ~~ortho and dental~~ and orthodontic PAs.

★ Is Proc. Code A Generic Code?:
☐ Yes ☐ No ☒

Rendering Provider
☐ Same as Billing Provider

Rendering NPI: or Atypical Provider ID:
Address/Locator: Find
Taxonomy:

Rendering Provider: Contact Name:
Address 1: City:
Address 2: State:
Phone: ZIP Code:

Current Status
Status: D-DENIED ☐ Approved as Requested
Reason:
Determining Clinician:
DD1-PA ADD INF
DD2-POLICY
DD3-LN ADD INF
DD4-NOT CVRD

STATUS HISTORY
Status Reason Date User ID
DENIED

Appeal Status
Status: Date:

Update Cancel

★ Is Proc. Code A Generic Code?:
☐ Yes ☐ No ☒

Rendering Provider
☐ Same as Billing Provider

Rendering NPI: or Atypical Provider ID:
Address/Locator: Find
Taxonomy:

Rendering Provider: Contact Name:
Address 1: City:
Address 2: State:
Phone: ZIP Code:

Current Status
Status: D-DENIED ☐ Approved as Requested
Reason:
Determining Clinician:
DD1-PA ADD INF
DD2-POLICY
DD3-LN ADD INF
DD4-NOT CVRD

STATUS HISTORY
Status Reason Date User ID
DENIED

Appeal Status
Status: Date:

Update Cancel

Step Action

- 6 Select the appropriate PA Status Reason Code from the **Reason** drop-down menu.
- Some of the PA Status Reason Codes that may populate for the user to select if the PA request is D-DENIED, M-MODAPPROV, or R-REDUCTION are:
- **DD1 – PA ADD INF** – PA record is denied for lack of receipt of requested additional information.

	<p>If the DD1 Reason Code is assigned to a line, the Additional Information and Policy sections will display for the user to complete.</p> <ul style="list-style-type: none"> • DD2 – POLICY – Service not supported by State policy. If the DD2 Reason Code is assigned to a line, the Policy and Denial Reason sections will display for the user to complete. • DD3 – LN ADD INF – Individual service is denied for lack of information. If the DD3 Reason Code is assigned to a line, the Additional Information and Policy sections will display for the user to complete. • DD4 – NOT CVRD – Service is not covered by the State Medicaid plan. If the DD4 Reason Code is assigned to a line, the Service Code and Service Description are generated from the existing information on the PA record.
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Note: The **EPSDT Reason** section allows the user to enter the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) criteria specific to the decision. The information entered is used in the generation of the corresponding PA Adverse Decision Letter.

If the denial reason is DD2 or DD4 and the beneficiary is under age 21, the **EPSDT Reason** section will populate for the user to complete. The user must select one or more checkboxes for EPSDT 1, EPSDT 2, or EPSDT 3. If EPSDT 2 or EPSDT 3 is selected, the user must enter text explaining why the EPSDT criterion was not met.

If the denial reason is DD4 and the beneficiary is 21 years or older, no additional sections will populate and the user is not required to enter any new letter information on the line.

★ Is Proc Code A Generic Code?:
☐ Yes ☒ No

Rendering Provider
☐ Same as Billing Provider

Rendering NPI: OR Atypical Provider ID:
 Address/Locator: Find
 Taxonomy:

Rendering Provider: Contact Name:
 Address 1: City:
 Address 2: State:
 Phone: ZIP Code:

Current Status
 Status: ☒ Approved as Requested Date: 12/06/2019
 Reason: User ID: FMSJM90
 Determining Clinician:

STATUS HISTORY

Status	Reason	Date	User ID
SUSPENDED	<input checked="" type="checkbox"/>	12/06/2019	

Appeal Status
 Status: Date:

Policy
 ★ Policy Name: 99 **7**
Leading Text: Medical Health Plan policy rules found at [Policy Section] of [Policy Name] guided our decision.
8 Policy Name Text:
 250 characters remaining

★ Policy Section Level 1: 99 **9**
Leading Text: Medical Health Plan policy rules found at [Policy Section] of [Policy Name] guided our decision.
10 Policy Section Level 1 Text:
 325 characters remaining

Policy Section Level 2: NONE
 Policy Section Level 2 Text:
 Policy Section Level 3: NONE
 Policy Section Level 3 Text:

Policy Citation
 Available Options
11 99
12 Add > Add All > < Remove < Remove All
 Selected Options

Leading Text: Here are the policy requirements your request did not meet:
13 Policy Citation Text:
 1000 characters remaining
 Policy Citation Text:

Denial Reason
 ★ Denial Reason: 99 **14**
15 Denial Reason Text:
 1000 characters remaining

16 Update Cancel

Note: When the user is manually entering information in any text field on the PA, the system will utilize the spell check and grammar functionality. Grammar errors are identified with a green underline and spelling errors are identified with a red underline.

If the user hovers over the identified errors highlighted in green, the system will display suggested grammar corrections for the user to select.

If the user hovers over the identified errors highlighted in **red**, the system will display suggested spelling corrections for the user to select.

Additionally, the number of errors is populated in the bottom right corner of the field. If no errors are identified, a check mark will display in the bottom right corner of the field. All identified grammar errors in any field on the PA must be corrected in order for the PA to be saved.

When the user feels that a spelling error identified is not an error but accurate NCTracks PA text, the user can override the error by selecting the **Override Spell Check** checkbox on the page. Depending on the PA Type, when the user selects the **Update** or **Add** button, the user receives a validation message that spelling/grammar errors remain and the **Override Spell Check** checkbox displays.

Note: For Long-Term Care (LTC) PA Types, the **Override Spell Check** checkbox displays when the user selects the **Validate** button or navigates to a different page of the PA.

Spelling error words overridden by State users will immediately be added to the tool's customized dictionary; when used again during PA adjudication, these words will not appear as errors and will not be available for lookup on the [PA Spell Check Override Search page](#).

Step	Action
7	Select the appropriate Policy Name from the Policy Name drop-down menu (in this example, the Policy Name used is 99-Other). Note: If 99-Other is selected for the Policy Name, the system will display the Leading Text information and a Policy Name Text. Predefined and manually entered citation text cannot be combined to complete the policy and denial decision information for the DD2 reason.
8	Enter the Policy Name Text information. Note: The Policy Name Text field is where the user must manually enter the policy information in the text field.
9	Select the appropriate option from the Policy Section Level 1 drop-down menu. Note: If 99-Other is entered for Policy Section 1, then no section level 2 or 3 can be entered by the user.
10	Enter the Policy Section Level 1 Text information. Note: This field populates when 99-Other is selected from the Policy Section Level 1 drop-down menu. From the Policy Section Level 2 and Policy Section Level 3 drop-down menus, the user is able to select the None option.
11	Select the appropriate option(s) from the Available Options list in the Policy Citation section.
12	Select the Add or Add All option to add the option(s) to the list in the Selected Options section.
13	Enter Policy Citation Text information. Note: If 99-Other is selected for the Policy Citation ID, the Policy Citation Text field displays and the user is required to manually enter the appropriate text. If the selected Policy Name code is not 99-Other , the system will display the description of each selected Policy Citation.
14	Select the appropriate Denial Reason from the Denial Reason drop-down menu. Note: If the user selected the 99 value from the policy citation available options, then 99 is the only option for selection in the Denial Reason drop-down menu.
15	Enter Denial Reason Text information. Note: If 99-Other is selected for the Denial Reason, the system will display the Denial Reason Text field for the user to manually enter information.

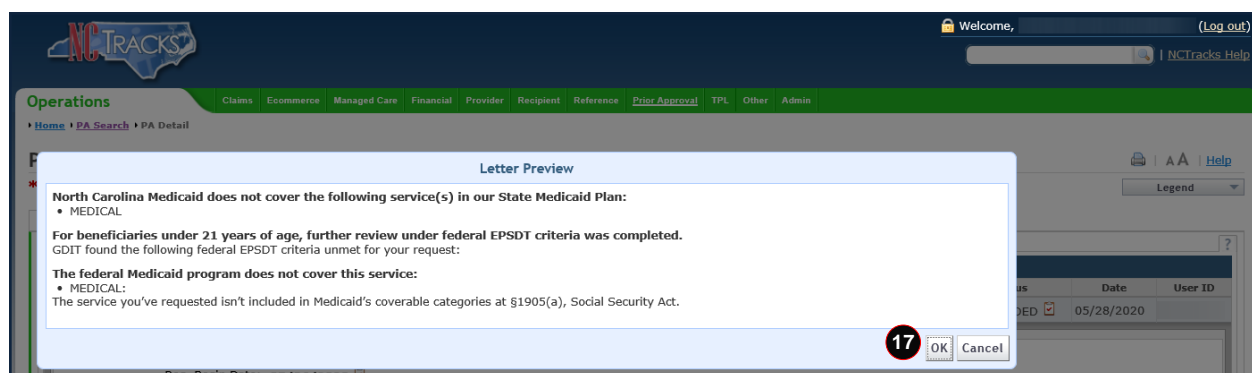
Step	Action
16	Select the Update button.

Update the PA

Once the **Update** button is selected, the user will receive an NCTracks pop-up message that displays a preview of the Adverse Decision Letter being added for a PA request with the status of Denied, Modified Approved, or Reduction.

Note: On an LTC PA, the header page displays the letter preview when the user selects the **Validate** or **Save** button or navigates away from the page, for a PA with the status of Denied, Modified Approved, or Reduction and with newly added text in the adverse decision letter fields.

If any spelling/grammar errors remain, the **Override Spell Check** checkbox will display.



Step	Action
17	Select the OK or Cancel button. <ul style="list-style-type: none"> If the user selects OK, the system will close the window and allow the user to continue the adjudication process. If the user selects Cancel, the system will close the window and keep the user on the detail line to make corrections as needed. If corrections are made and the user selects Update, Validate, or Save, as required for the PA type, a new letter preview will be generated.

Save the PA

To complete the PA, the user must ensure that the added information is updated on the PA detail line and save the PA.

Step	Action
18	Select the Save button.

When the **Save** button is selected, an NCTracks pop-up message displays, advising the user of the letter being added for adverse decision status and confirming if the user wants to continue.

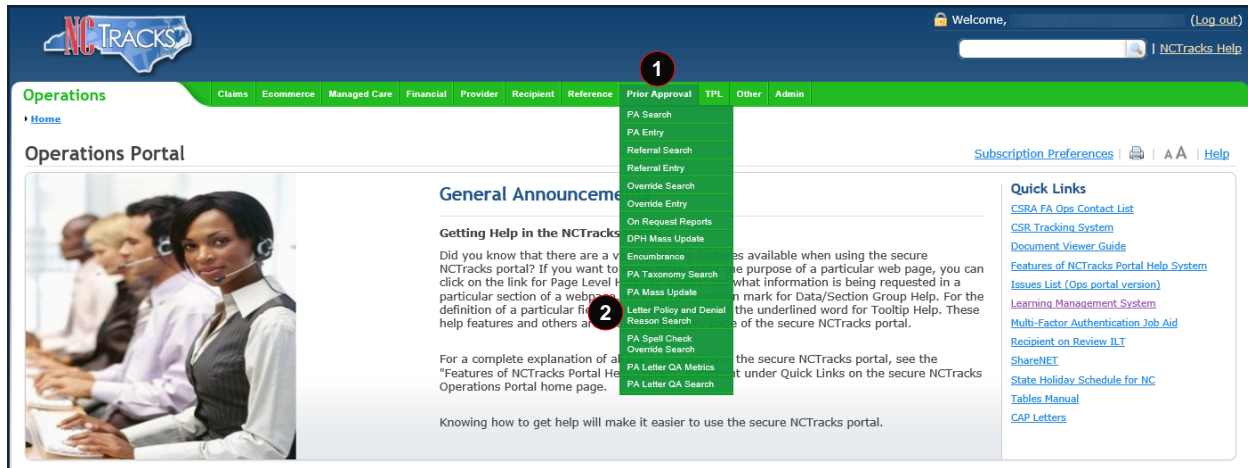
If the user selects **OK**, the system will generate the letter identified in the message and populate the Save Successful message. If the user selects **Cancel**, the system will navigate the user back to the detail page to complete the processing prior to selecting the option to save the PA update.

NCTracks Success Message

When the PA data is accepted, the application navigates to the **PA Search** page. This page displays an “NCTracks Success” message with the PA number, the confirmation number, the status of the PA, and a note that the PA was saved successfully.

LETTER POLICY AND DENIAL REASON SEARCH PAGE

The **Letter Policy and Denial Reason Search** page allows authorized users to search and generate PA criteria sequences. Authorized users will access this page by selecting **Prior Approval > Letter Policy and Denial Reason Search**.



Step	Action
1	Hover over the Prior Approval tab.
2	Select Letter Policy and Denial Reason Search .

Letter Policy and Denial Reason Search Page

The **Letter Policy and Denial Reason Search** page allows an authorized user to enter PA record criteria to search for the associated letter policy and denial reason.

When completing a Letter Policy and Denial Reason search, the user must select the appropriate options for the **PA Type**, **Policy Number**, and **Section Level 1** fields.

Step	Action
1	Select the PA Type from the drop-down menu.
2	Select the Policy Number from the drop-down menu.
3	Select the Section Level 1 from the drop-down menu.
4	Select the Find button.

Letter Policy and Denial Reason Search Results

The **Search Results** section displays each unique PA criteria sequence matching the entered Letter Policy and Denial Reason search criteria.

Selecting a **PA Criteria Sequence Number** link directs the user to the **Letter Policy and Denial Reason Detail** page to view the PA criteria sequence details and all policy and denial reasons associated with the selected sequence number.

Step	Action
1	Select a PA Criteria Sequence Number from the Search Results.

Letter Policy and Denial Reason Detail Page

The **Letter Policy and Denial Reason Detail** page displays the details for the PA Criteria Sequence Number selected on the **Letter Policy and Denial Reason Search** page.

Field	Description
PA Type	PA Type value in the PA criteria
Health Plan	Health Plan value in the PA criteria
Drug Type	Drug Type value in the PA criteria; only applicable to pharmacy PAs
Initial/Reauth	PA header status in the PA criteria
LTC Level of Care	Level of care in the PA criteria; only applicable to LTC PAs
Preferred/Non Preferred	Drug type status in the PA criteria; only applicable to pharmacy PAs
Recipient Min Age	Youngest recipient age to which the PA criteria are applicable
Recipient Max Age	Oldest recipient age to which the PA criteria are applicable
Service Type/Drug Name Type	Category of the entered non-pharmacy service type or pharmacy drug name
Service Type/Drug Name Code	Individual non-pharmacy service type or pharmacy drug name in the PA criteria
Service Type/Drug Name Group	Group name of non-pharmacy service types or pharmacy drug names in the PA criteria
Procedure Code Type	Category of the entered procedure code value

Field	Description
Procedure Code	Individual procedure code in the PA criteria
Procedure Code Group	Group name of procedure code in the PA criteria

Policy/Section/Denial Information

The authorized user can view the details for each populated policy and denial reason combination by expanding the row.

The authorized user can end-date Policy and Denial Reason combinations listed in the **Policy**, **Policy Section**, **Policy Citation**, and **Policy Denial Reason** sections.

If a Policy and Denial Reason combination is end-dated, it will not be available for a user to select as an option when adding Adverse Decision Letter information at the time of processing the PA request.

Adding a New Policy and Denial Reason

An authorized user can add new Policy and Denial Reason combinations in the open rows within the **Policy**, **Policy Section**, **Policy Citation**, and **Policy Denial Reason** sections.

If the authorized user is adding a new Policy and Denial Reason combination, the system will validate the new entry to ensure it does not exist for an active record.

The authorized user must select the **Add** button. Once the **Add** button is selected, the system will verify the new criteria information entered against all existing criteria; if a match is found, the user will receive a "PA criteria already exists" error message. In such cases, the user must modify the criteria or search for the criteria to obtain the details.

If no match is found, the authorized user will be redirected to the **Letter Policy and Denial Reason Detail** page to enter new criteria information.

Home • Letter Policy and Denial Reason Search • Letter Policy and Denial Reason Detail

Letter Policy and Denial Reason Detail - 175

* Indicates a required field

LETTER POLICY AND DENIAL REASON DETAIL

PA Type: **A16-MEDICAL** Health Plan: **N/A** Drug Type:
 Initial/Reauth: LTC Level Of Care: Preferred/Non Preferred:
 Recipient Min Age: **0** Recipient Max Age: **115**
 Service Type/Drug Name Type: Service Type/Drug Name Code: Service Type/Drug Name Group:
 Procedure Code Type: **I-INDIVIDUAL** Procedure Code: **99183** Procedure Code Group:

* Policy Number	* Policy Name	* Begin Date	* End Date	User ID	Last Update
1A-8	Clinical Coverage Policy 1A-8, Hyperbaric Oxygenation Therapy	11/01/2019	12/31/9999	CSR 2109	02/26/2020 05:23:04 PM

250 characters remaining

Add Clear

* Policy Number	* Section Level 1	* Section Level 1 Name	* Begin Date	* End Date	User ID	Last Update
1A-8	4.2	Section 4.2 - Specific Non-Covered Criteria	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM
1A-8	5.1	Section 5.1 - Prior Approval	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM
1A-8	5.2	Section 5.2 - Prior Approval Requirements	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM
1A-8	5.3	Section 5.3 - Additional Limitations or Requirements	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM
1A-8	5.4	Section 5.4 - Technical Requirements	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM
1A-8	5.5	Section 5.5 - Service Limitation	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM
1A-8	99	Other	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM

125 characters remaining

Add Clear

POLICY SECTION LEVEL 2

POLICY SECTION LEVEL 3

POLICY CITATION

POLICY DENIAL REASON

Save Reset Page

Adding New PA Criteria

The authorized user is also able to generate a new PA criteria sequence in the **Add New PA Criteria** section. To add a new PA criteria sequence, the authorized user would select the appropriate PA Type, enter the PA record details, and select the **Add** button.

When making selections in the **Add New PA Criteria** section, the authorized user may be presented with the error message "Selection not allowed for the PA Type" if the selected option is not applicable to the PA Type.

Step	Action
1	Select the PA Type that you want to add.
2	Select the Add button.

Once the authorized user has selected the **Add** button, the system will verify that the information entered is unique and not associated with an already existing sequence number.

If the entered information passes the system validation, the authorized user is directed to the **Letter Policy and Denial Reason Detail** page to add policy and denial reason information to be associated with the new PA criteria.

PA SPELL CHECK OVERRIDE SEARCH

The **PA Spell Check Override Search** page allows users to search words identified as having spelling errors but overridden by the user.

Step	Action
1	Hover over the Prior Approval tab.
2	Select PA Spell Check Override Search .

PA Spell Check Override Search Page

The **PA Spell Check Override Search** page displays. The search can be performed for a single word or by using search criteria. Search Results will be displayed in inquiry mode only.

Additionally, authorized users can retrieve the next available word to review for acceptance into the customized spell check dictionary.

Field	Description
PA Type	Drop-down lists the PA Types Note: The user must select a PA Type in order to navigate to the PA Spell Check Override Detail page to view the next word to be reviewed for the selected PA Type.
# of Words for Review	Count of override word records ready for review for the selected PA Type
Next Word	Directs the user to the PA Spell Check Override Detail page to view the next word to be reviewed for the selected PA Type
Count	Displays the number of override word records ready for review
Override Word	Unique search criteria; if Override Word entered, no other search criteria are allowed
PA Type	Drop-down lists the PA Types
Status	Drop-down lists the QA Status
User ID	User who last updated the record
Record Begin Date	Date override word record added in NCTracks. Note: Record Begin Date and Record End Date must be used together with at least one other search criterion.
Record End Date	Date override word record added in NCTracks. Note: Record Begin Date and Record End Date must be used together with at least one other search criterion.
Find	Submits entered criteria
Clear	Clears all entered criteria

PA Spell Check Override Search Results

The **Search Results** section displays the **Override Word**, **PA Num**, **Letter Number**, **Policy Sequence Num**, **PA Type**, **Status**, **UI Page Name**, **UI Field Name**, **Review Date**, and **User ID** for the entered criteria.

SEARCH RESULTS									
Override Word	PA Num	Letter Number	Policy Sequence Num	PA Type	Status	UI Page Name	UI Field Name	Review Date	User ID
rsn		2530		A05-DENTAL	N-NEW	1-DETAIL	08-DENIAL RSN	05/11/2020	ATROY671

Step	Action
1	Select the Override Word link.

PA Spell Check Override Detail Page

The **PA Spell Check Override Detail** page displays. This page allows users to complete the review of the override word or view the record details.

Field	Description
Override Word	Text of override word
PA Number	PA number associated with the override word
Letter Number	Internal NCTracks Letter ID
UI Page Name	Operations Portal page that contains the override word
UI Field Name	Text field on the Operations Portal page that contains the override word
Detail Line	Detail line associated with the UI page and text field
Status	<p>Displays the status of the record. From the Status drop-down menu, the user is able to select A-ACCEPT or R-REJECT. Status values I-IND ACCEPT, J-IND REJECT, and V-VOID are automatically set by the system.</p> <p>Note: The N-NEW status displays when an override word is added to the system.</p> <p>Following are the status codes for override words added by Fiscal Agent (FA) users:</p> <ul style="list-style-type: none"> N-NEW – Default code when override word is added A-ACCEPT – Manually assigned by authorized FA supervisor R-REJECT – Manually assigned by authorized FA supervisor I-IND ACCEPT – Assigned by NCTracks when a different override record for the same word is set to A by an authorized FA or State user J-IND REJECT – Assigned by NCTracks when a different override record for the same word is set to R by an authorized FA or State user

Field	Description
	<ul style="list-style-type: none"> • V-VOID – Assigned by NCTracks when PA letter associated with the override word is deleted. If the prior status was A or R, then all other existing override records for the same word are also set to V. If the prior status was A, then the override word is also deleted from the custom spell check dictionary. <p>Following are the status codes for override words added by State users:</p> <ul style="list-style-type: none"> • A-ACCEPT – Default code when override word is added • R-REJECT – Manually assigned by authorized State user • V-VOID – Assigned by NCTracks when PA letter associated with the override word is deleted. If the prior status was A or R, then all other existing override records for the same word are also set to V. If the prior status was A, then the override word is also deleted from the custom spell check dictionary. <p>Note: All override words added by State users are automatically assigned the status of A-ACCEPT.</p>
User ID	User who last updated the record
Review Date	Date the record was last updated